Come Aboard as a Medicaid Dental Provider

How Do I Become a Medicaid Provider?

- *Contact Provider Enrollment at 1-888-223-3630 or Medicaid's Dental Program at 1-334-242-5997 for an enrollment application. (application enclosed)*

- *Complete relevant sections. Medicaid is including a cover sheet indicating specific pages you must complete. You may also use the checklist located on Page 1 of the Reference Material section, the last section of the application package.*

- *Contact Provider Enrollment or the Medicaid Dental Program at the above numbers if you have questions regarding completion of the application.*

- *Once Provider Enrollment has received your complete application with all required documentation, a nine-digit provider number will be issued to you. Your provider number will be effective the first date of the month in which the completed enrollment application is received.*

Questions Most Frequently Asked

1.   What amount will I be reimbursed for services rendered to Medicaid recipients?

Answer: Effective October 1, 2000 Medicaid's dental rates were raised on the average to 100% of Blue Cross rates for covered dental services (Medicaid fee schedule included).

2.   How do I receive payment for services rendered to a Medicaid Patient?

Answer: If you use an office computer to bill other insurance companies, you should be able to bill Medicaid claims as well. Charges for services rendered to a Medicaid recipient can be submitted to EDS through the Provider Electronic Solution software (PES) or an ADA approved dental claim form. The software is free to all providers.

3.   If I become a Medicaid Provider, do I have to take every Medicaid patient who calls for an appointment?

Answer: No, you as a Medicaid provider can determine the number of new patients you will accept on a weekly or monthly basis.

4.   When can I charge a Medicaid patient?

Answer: Medicaid patients can be charged for a non-covered procedure, and for any service rendered when the patient is not eligible for Medicaid dental services.

5.   How do I determine if a person is eligible for Medicaid Dental Services?

Answer: Obtain eligibility information by calling the Automatic Voice Response System at 1-800-727-7848 or by submitting an eligibility verification request through PES from your personal computer. In general, children under age 21 who are eligible for full Medicaid services are covered for dental services. Dental benefits are not provided for any pregnant female under age 21 whose coverage is based solely on SOBRA eligibility.

Rev. 2/01